| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

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| ✔ | Rejected | N | | Non-elected |
| = | Allowed | I | | Interference |
| – (Through numeral) | Canceled | A | | Appeal |
| ÷ | Restricted | O | | Objected |

| Claim | | Date | Claim | | Date | Claim | | Date |
|---|---|---|---|---|---|---|---|---|
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If more than 150 claims or 10 actions
staple additional sheet here